

School/Site: \_\_\_\_\_

# After-School Snack Menu Production Record

(National School Lunch Program)

Week of: \_\_\_\_\_

	<b>A</b>	<b>B</b>	<b>C</b>	<b>D</b>	<b>E</b>	<b>F</b>	<b>G</b>
	Check (✓) Menu Components for each day (must ✓ at least 2 required components)	Snack Menu	No. of Planned Snacks	Serving Size	Amount Prepared (A x D)	# Students Served	# Adults Served
<b>Monday</b>	<input type="checkbox"/> M/MA (1 oz) <input type="checkbox"/> Milk (1/2 pt) <input type="checkbox"/> F/V (3/4 cup) <input type="checkbox"/> G/B (1 serving) <input type="checkbox"/> Other						
<b>Tuesday</b>	<input type="checkbox"/> M/MA (1 oz) <input type="checkbox"/> Milk (1/2 pt) <input type="checkbox"/> F/V (3/4 cup) <input type="checkbox"/> G/B (1 serving) <input type="checkbox"/> Other						
<b>Wednesday</b>	<input type="checkbox"/> M/MA (1 oz) <input type="checkbox"/> Milk (1/2 pt) <input type="checkbox"/> F/V (3/4 cup) <input type="checkbox"/> G/B (1 serving) <input type="checkbox"/> Other						
<b>Thursday</b>	<input type="checkbox"/> M/MA (1 oz) <input type="checkbox"/> Milk (1/2 pt) <input type="checkbox"/> F/V (3/4 cup) <input type="checkbox"/> G/B (1 serving) <input type="checkbox"/> Other						
<b>Friday</b>	<input type="checkbox"/> M/MA (1 oz) <input type="checkbox"/> Milk (1/2 pt) <input type="checkbox"/> F/V (3/4 cup) <input type="checkbox"/> G/B (1 serving) <input type="checkbox"/> Other						